

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO.	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	1		1				51		
2		1		1			52		
3		1					53		
4		1		1			54		
5		1		1			55		
6		1		1			56		
7		6		1			57		
8		6		1			58		
9		1		1			59		
10		1		1			60		
11	1		1				61		
12	1		1				62		
13		1		1			63		
14		1		1			64		
15		1		1			65		
16		1		1			66		
17		1		1			67		
18		1		1			68		
19							69		
20							70		
21							71		
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35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	3		3				TOTAL IND.		
TOTAL DEP.	25		14				TOTAL DEP.		
TOTAL CLAIMS	28		17				TOTAL CLAIMS		